U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, tines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official U	se Onich Och
KDV252036)	E . To
12.1 K	(Diene
	NEW COLLEGE

1. File Number 4 - 14000

W Repka

3. Name and address of person filing.

Name Jerry

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

Name Carpenters Piledrivers Local Union 1846

4. Name, file number, and address of latter organization.

	Labor Organization File Number 029-977
P.O. Box, Bidg., Room No., if any	P.D. Box, Building and Room Number, Fany
Stree: 1215 Japonica Street	Street 315 South Broad Street
City New Orleans	City New Orlreans
State Louisiana ZIF Code + 4 70117-4604	State Louisiana ZIP Code + 4 70119
5. Position in labor organization. Tréasurer	
Enter appropriate data below if, during the past flacal year, you or your apol (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests slone set forth in the instructions):
A. Held an interest in, engaged in transactions (including leans) with, or o monetary value from an employer whose employees your organization.	derived income or other economic banefit of on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any	
P.O. Box, Bidg., Room No., if any	
Street	7.b. Amount.
Сну	\$0
State ZIP Code + 4	
Signi	sture
16. Signature and verification. The uncersigned declares, under penalty of is submitted in this report (including the information contained in any accompany) undersigned's knowledge and belief, true, correct, and complete. (See the sec	ng documents), has been examined by the signatory and is, to the best of the
Signed to glask hum whend	On 08/09/2005 504-945-3127
1 0 -	Date Telephone Number
Form LM-30 (2003)	Dage 4 of 6

Name of Person Filling Jerry Repks		File Number U-		
8. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selfing or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (Including trade name, if any). Name LCRC Joint Apprenticeship and Training Trust Trade Name, if any: P.O. Box, Bldg., Room No., If any Building 1 Street 10054 I+10 Service Road, East City New Orleans State Louisiana ZIF Code+4 70127-1888 10. If 8.5. or 8 c. is checked give trust or employer's name. Name Trade Name, if any. P.O. Sox, Bldg., Room No., if any	3. Business ceals with: a. Labor Organiza b. Trust c Employer 11.a. Nature of such deali Union is co-sponso	ng,		
Street City State ZIP Code + 4	Palm Springs Leade Wages, Registrati	d crincome modelved. 12/31/2004 - \$35,108.92 rship Conference: 2/15-2/ on,Hotel,Airfare,meals - \$ in Class: 4/20-4/30/2004		
	12.b. Amount.		\$38,681	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money				
13.a Name and address of Employer or Labor Relations Consultant (including trace name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street	14.a. Nature of payment			
City State ZIP Gods + 4				
13.b. Is the Business an Employer or Consultan: 7	14.b, Amount of payment.			

Name of Person Filing Jerry	Repka	File Number U-

Part & Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Bysines	io (including trade name, if any).	9. Business deals with:	
	nticeship and Training Trust	a. Labor Organization	
Trade Name, il any.		b Trust	
P.O. Box, Bidg., Room No., if an	Y Building 1		
Street 10054 I-10 Service	re Road, Bast	c. Employer	
City New Orleans			
State Louisiana	ZIP Code + 4 70127-1886		
10, If 8.b. or 9 c. is checked give to	ust or employer's name.	11.a. Nature of such deailing.	
Name		Union is co-sponsor of the Fund.	
Trade Name, if any:			
P.O. Box, Bldg., Room No., it any			
Street			
City			
Stare	ZIP Code + 4	11.b. Approximate deliar value of such dealing.	\$239,007
		12.a. Nature of interest held or income received.	
		WAGES AND FRINCES: UBC Forklift Class: 8/23-8/28/2004	
		\$1,347.01 UBC Firestop Class: 09/2-9/3/2004	
		\$621.70	
		40 h Annual	\$1,969
		12.b. Amount.	57,207

Name of Person Fling Jerry Repka	File Number Li-
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Part & Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or defling or leasing directly or indirectly to, or otherwise dealing with your abor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deats with:
Name LCRC Joint Apprenticeship and Training Trus	a. Labor Organization
Trade Name, if any:	from the way on the
P.O. Bex, Bidg., Room No., if any Building 1	b. Trust
Street 10054 I-10 Service Road, Enst	c. Employer
City New Orleans	
State Louisiana ZIP Code + 4 70127 - 1888	8
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Union is co-sponsor of the Fund
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
Cty	
State ZIF Code + 4	11.b. Approximate dollar value of such dealing. \$239,007
	12.a. Nature of intensit held or income received. WAGES AND PRINCES: Materials gathering for preparation of Tradeshow Class 24 hours: Baton Rouge Training Center week of 12/20/04 - \$916.82 UBC Trade Show Qualifying Program: 3/1-3/5/04 \$1,359.80 UBC Trade Show Class: 11/1-11/5/04 - \$1,533.28
	12.b. Amount. \$3,810

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۱	Name of Person Fling Jerry Repka	FI	ile Number U-	

Part B Continuation Page

E. Held an interest in or derived income or aconomic benefit with monetary value from a business (1) a substantial part of which consists of buying from, seiling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or seiling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business ((including trade name, If any).	9. Business deals with:	· · · · · · · · · · · · · · · · · · ·
	iceship and Training Trust	a. Laber Organization	
Trade Name, it any		b Trust	
P.O. Box, Bldg., Room No., If any	Suilding !	hammad	
Street 10054 I-10 Service	Road	c. Employer	
Chy Kew Oxleans			
State Louisiana	ZIP Code + 4 70127-1688		
10. If 9.b. or 9.c. is enecked give trust	or employer's name.	11.a. Nature of such dealing.	
Name		Union is co-sponsor of the Fund	
Trede Name, if any:			
⊃ O. Box, Bldg , Room No , if any			
S(ree;			
City			
State:	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$239,007
		12.a. Nature of interest held or income received.	
		Minor Child: Grass Cutter	
		12.t. Amount.	\$800

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Name of Person Filing Jerry	Repka	File Number U-
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Part & Continuation Page

S. Heid on interest in or derived income or accommic benefit with monetary value from a business (1) a substantial part of which consists of buying from, setting or teasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or lessing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business Name Carpenters Intern Trace Name, if any: P.O. Box, Bidg., Room No., if any Street 6901 Placid Stree City Las Vegas	ational Training Fund	8. Business deals with: a. Labor Organization b. Trust c. Employer	
State Nevada	ZIP Code + 4 89119		
16, if 9.b. or 9.c. is checked give true Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City	st or employer's name.	11.a. Nature of such realing. Union participates in the Fund	
State	ZIP Code + 4	11.b. Approximate dellar value of such dealing. 12 a. Nature of Interest held or income received. Instructor fiee: 2/2004	\$57,362
		12.t. Amouni.	\$100